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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 247091US2SRD
		First Inventor or Application Identifier Mitsunobu YOSHIDA, et al.
		Title SIMULATION METHOD AND PROGRAM PRODUCT

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents</i>	<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</div> <div>2. <input checked="" type="checkbox"/> Specification Total Sheets <input type="text" value="40"/></div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets <input type="text" value="8"/></div> <div>4. <input type="checkbox"/> Oath or Declaration Total Pages <input type="text" value=""/></div> <div>    a. <input type="checkbox"/> Newly executed (original or copy)</div> <div>    b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d))         (for continuation/divisional with box 17 completed)</div> <div>        i. <input type="checkbox"/> DELETION OF INVENTOR(S)            Signed statement attached deleting inventor(s) named in            the prior application, see 37 C.F.R. §1.63(d)(2) and            1.33(b).</div> <div>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</div> <div>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</div> <div>    a. <input type="checkbox"/> Computer Readable Form (CRF)</div> <div>    b. Specification or Sequence Listing on :         i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or         ii. <input type="checkbox"/> Paper</div> <div>    c. <input type="checkbox"/> Statements verifying identity of above copies</div>	<b>ACCOMPANYING APPLICATION PARTS</b> <div>7. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</div> <div>8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div> <div>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</div> <div>10. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div> <div>12. <input type="checkbox"/> Preliminary Amendment</div> <div>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard</div> <div>14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (1) (if foreign priority is claimed)</div> <div>15. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div> <div>16. <input checked="" type="checkbox"/> Other: Request for Priority</div>

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10/743086

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17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

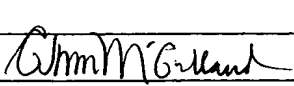
<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application no.:
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Prior application information: ☒ Examiner: \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

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Registration Number 21,124



Doc 22850

247091US2SRD

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Mitsunobu YOSHIDA, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: SIMULATION METHOD AND PROGRAM PRODUCT

## FEE TRANSMITTAL

COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	20 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	6 - 3 =	3	x \$86 =	\$258.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
BASIC FEE				\$770.00
TOTAL OF ABOVE CALCULATIONS				\$1,158.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
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TOTAL				\$1,158.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of \_\_\_\_\_ A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
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Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

Date: \_\_\_\_\_

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